PTC/SB/83 (04-08)
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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/813,980	
Filing Date	03/31/2004	RECEIVED
First Named Inventor	Knowlton	CENTRAL FAX CENTER
Art Unit	3774	JUL 0 8 2008
Examiner Name	Thomas Sweet	<u> 30L </u>
Attorney Docket Number	39254-0018.UO	

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
Please withdraw me as attorney or agent for the above identified patent application, and						
all the practitioners of record;						
the practitioners (with registration numbers) of record listed on the attached paper(s); or						
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NOTE: The immediately preceding box should only be marked when the practitioners were appointed using the tisted Customer Number.						
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10.40(c)(1)(i) 10.40(c)(1)(ii) 10.40(c)(1)(iii) 10.40(c)(1)(iii)						
10.40(c)(1)(v)						
10.40(c)(4) 10.40(c)(5) 10.40(c)(6). Please explain below:						
Certifications						
Check each box below that is factually correct. WARNING: If a box is left unchecked, the request will likely not be approved.						
I/We have given reasonable notice to the client, prior to the expiration of the response period, that the practitioner(s) intend to withdraw from employment.						
2. Me have delivered to the client or a duly authorized representative of the client all papers and property (including funds) to which the client is entitled.						
3. Me have notified the client of any responses that may be due and the time frame within which the client must respond.						
Please provide an explanation, if necessary:						

[Page 1 of 2]
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